DESI WANITARTE COLA

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/900,013												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER	
TOTAL CLAIMS			9				Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			q min	us 20=	. D			X\$ 9=	* `	OR	X\$18=	
INDEPENDENT CLAIMS			/ mi	nus 3 =	· Ø		H	X40=			X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT						<u> </u>	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+135=		OR	+270=	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	710
C	15-0		SMALL	ENTITY	OR	OTHER SMALL	-					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 12	Minus	. ລ	.0	= O		X\$ 9=\		OR	X\$18=	10
	Independent	· 2	Minus		3	= 0		X40=	/	OŘ	X80=	38
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	DUE
							L	TOTAL			TOTAL	-0
5	•	(Column 1)		(Colu	mn 2)	(Column 3)	A	DDIT. FEE		,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	П	X\$ 9=		OR	X\$18=	
	Independent	-	Minus	•••	- 47	=	1	X40=		-	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
							L	+135=		OR	+270=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colui		(Column 3)	_					٠.
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATĘ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	•		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	•••		=		X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
• 1	f the entry in col-	mn 1 is lose than t	ne antry in col-	mn 2 w	antia an	hemp 2	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pai					er toun	id in the ap	propriate box	in cot	น กก 1.	

Application or Docket Number